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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/676,882
		Filing Date	September 30, 2003
		First Named Inventor	Randy B. Osborne
		Art Unit	2186
		Examiner Name	Paul W. Schlie
Total Number of Pages in This Submission	14	Attorney Docket Number	42P16963

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 80px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	February 27, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name	Susan McFarlane		
Signature		Date	February 27, 2006



# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 120.00

## Complete if Known

Application Number 10/676,882  
Filing Date September 30, 2003  
First Named Inventor Randy B. Osborne  
Examiner Name Paul W. Schlie  
Art Unit 2186  
Attorney Docket No. 42P16963

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):  
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments  
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	20*	0 x 50.00	\$0.00
Independent Claims	3*	0 x 200.00	\$0.00
Multiple Dependent			
Large Entity			
Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	50	2202	25
1201	200	2201	100
1203	360	2203	180
1204	790	2204	395
1205	300	2205	150
		Fee Description	
		Claims in excess of 20	
		Independent claims in excess of 3	
		Multiple Dependent claim, if not paid	
		**Reissue independent claims over original patent	
		**Reissue claims in excess of 20 and over original patent	
		SUBTOTAL (1)	(\$) 0.00

\*or number previously paid, if greater, For Reissues, see below

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
2053	130	2053	130
1251	120	2251	60
1252	450	2252	225
1253	1,020	2253	510
1254	1,590	2254	795
1255	2,160	2255	1,080
1401	500	2401	250
1402	500	2402	250
1403	1,000	2403	500
1451	1,510	2451	1,510
1460	130	2460	130
1807	50	1807	50
1806	180	1806	180
1809	790	1809	395
1810	790	2810	395
		Fee Description	
		Surcharge - late filing fee or oath	
		Surcharge - late provisional filing fee or cover sheet.	
		Non-English specification	
		Extension for reply within first month	
		Extension for reply within second month	
		Extension for reply within third month	
		Extension for reply within fourth month	
		Extension for reply within fifth month	
		Notice of Appeal	
		Filing a brief in support of an appeal	
		Request for oral hearing	
		Petition to institute a public use proceeding	
		Petitions to the Commissioner	
		Processing fee under 37 CFR 1.17(q)	
		Submission of Information Disclosure Stmt	
		Filing a submission after final rejection (37 CFR § 1.129(a))	
		For each additional invention to be examined (37 CFR § 1.129(b))	
		Other fee (specify)	
		SUBTOTAL (2)	(\$) 120.00

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type) William W. Schaal Registration No. 39,018 Telephone (714) 557-3800  
Signature [Signature] Date 02/27/06